

APPLICATION&FEES FOR TEMPORARY PERMIT SHALL BE RECEIVED 2 WEEKS PRIOR THE EVENT.
A LICENSED COMMERCIAL KITCHEN MUST BE USED TO OPERATE A TEMPORARY FOOD
OPERATION FROM – NO HOME BASED OPERATIONS ALLOWED PER CITY ORDINANCE (SEC 11-149).

NAME OF EVENT	_DATES			
LOCATION OF EVENT	TIMES			
NAME OF LICENSED COMMERCIAL KITCI	HEN			
NAME OF OWNER/OPERATOR		PHONE #		
ADDRESS				
ADDRESSSTREET	CITY	STATE	ZIP	
NUMBER OF FOOD BOOTHS:				
Provide hand washing, sanitizer pails, a	and ware washing set	<mark>up like Diagra</mark> ı	n on Page 2.	
List all food and drink items to be served_				
Describe the method of maintaining temp	eratures for Hot/Cold f	oods during trai	nsportation to site?	
How will you keep hot foods at 135°F or	above?			
How will you keep cold foods at 41°F or	less?			
Describe the type of tent or booth structur	re (canopy, sides, floor)			
Describe your equipment to protect food t	from customer contami	nation (lids, sne	eeze guards, etc.)	
Where will your approved water source be	e obtained from?			
How will food waste and wastewater be d			OFFICE USE ONLY	
Hand Sanitizer is NOT an Approved So				
FEE PAID \$CASH/CHECK#	EMPLOYEI	Ξ:		
OCHD 402-444-7480 1111 South 41 Stree	i Suite 130 Omana, I	NE 09102		